

NJ GEAR UP Scholarship Form First-Year Students

Students who are eligible for the NJ GEAR UP State Project Scholarship and wish to be considered for this award must complete this form prior to **each academic year** that they are enrolled in college in New Jersey. For updated forms, eligibility requirements and other information visit **http://www.nj.gov/highereducation/gearup**.

Deadlines are June 1st for the next academic year and November 1st for spring semester only.

- Late submissions will result in forfeiture of the scholarship for that semester. Do not wait for your term bill or award letter!
- Complete this form only after you have made a final decision about the college where you will attend.
- It is your responsibility to complete and return this **form each academic year** that you attend college. You do not need to submit a new form in the spring if you continue at the same college for both semesters.
- If you transfer to another college, you must submit a new form immediately.
- First-year students must also include the attached transcript request form.

You must file the FAFSA and submit this form each year or you WILL NOT receive funding

Date:	Date of Birth:
Student Name:	
Current Address/City/State/ZIP:	
Phone number:	Email:
If your name has changed since 2000, write your pro	revious name:
Indicate the semester(s) in which you will enroll:	Both Fall and Spring* ☐ Fall Only ☐ Spring Only
*If you do not attend in the fall semester, funds will r notify the Commission if you return to college for the	not be sent to your institution for the spring semester. You must e spring semester.
At which college or university will you enroll?	
(Required-List Only One)	
Are you enrolled at a particular campus?	
Degree program (e.g. A.S., B.S., B.A.):	Major:
Have you included the completed transcript request	form? □Yes
Have you earned a degree since 2000? □Yes	□No
If yes: Degree earned: Major:	Date earned:
Institution:	
Family Educational Rights Privac	y Act (FERPA) Permission to Release Information
held by your college may not be released to a third purple access to your information, please complete and College Bound/NJ GEAR UP to have access to my	cational Rights and Privacy Act of 1974 as amended, information party without written permission. To grant College Bound/NJ GEAR d sign: I, authorize educational records, including my college/ university academic, inancial information and social security number with their banking rship awards.
Student Signature	Date
IF STUDENT IS NOT YET 18 YEARS OLD:	
Parent Signature	Date
Parent SS#	

Mail with transcript request form to: NJ GEAR UP, NJ Commission on Higher Education, P.O. Box 542, Trenton, NJ 08625-0542 Returning students do not have to submit a high school transcript.



High School Transcript Request Form For the NJ GEAR UP Scholarship



As a requirement of the NJ GEAR UP Scholarship, we must receive a record of your final senior year grades in addition to your scholarship form. Please complete and sign this form. If possible, please also include your School ID (or Social Security Number). **The transcript may be unofficial.**

I hereby grant permission for my high school to release my final high school transcript to the New Jersey GEAR UP State Project at the New Jersey Commission on Higher Education.

Last Name (Please Print)	First Name	Middle Initial
Address		
City	State	Zip
Graduation Date (Month/Year)	Birtl	n Date
Name of High School	Sch	ool ID
Student's Signature	Date	e
Parent's Signature	Date	е
(If student is not yet 18 years old)		

First-year students only - return this form with your scholarship form to:

NJ GEAR UP, NJ Commission on Higher Education, P.O. Box 542, Trenton, NJ 08625-0542

Returning students do not need to submit high school transcripts